| Debtor 1 Jessica Lee Jackson | |
|--|---|
| Debtor 2 (Spouse, if filing) | |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA | |
| Case number 18-15950 Check if this is: | |
| (If known) An amended filing | |
| A supplement showing postpet 13 income as of the following o | • |
| Official Form 106I | |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | t 1: Describe Employment | | | |
|----|---|-----------------------|------------------|---------------------------------------|
| 1. | Fill in your employment information. | | Debtor 1 | Debtor 2 or non-filling spouse |
| | If you have more than one job, | Empleyment status | ■ Employed | ■ Employed |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | ☐ Not employed |
| | employers. | Occupation | unemployment | Correctional Officer |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | SCI Chester State Prison |
| | Occupation may include student or homemaker, if it applies. | Employer's address | philadelphia, PA | 500 E 4th Street Chester, PA 19013 |
| | | How long employed the | here? | 6 months |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.
 Calculate gross Income. Add line 2 + line 3.

| | | For Debtor 1 | For Debtor 2 or non-filing spouse | е |
|----|-----|--------------|-----------------------------------|----|
| 2. | \$ | 0.00 | \$3,302.00 | 00 |
| 3. | +\$ | 0.00 | +\$0.00 | 00 |
| 4. | \$ | 0.00 | \$3,302.00 | - |

| Deb | tor 1 | Jessica Lee Jackson | _ | (| Case numbe | er (<i>if k</i> | nown) | 18-1 | 5950 | | |
|-----|---------------|--|----------|------------|------------|------------------|-------|----------|--------|----------------|------------------|
| | | | | | For Debt | or 1 | | | Debtor | | |
| | | | | | | | | non | | pouse | |
| | Cop | by line 4 here | 4. | | \$ | - | 0.00 | \$_ | 3 | ,302.00 | <u>-</u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | à. | \$ | | 0.00 | \$ | | 594.00 |) |
| | 5b. | Mandatory contributions for retirement plans | 5b |). | \$ | (| 0.00 | \$ | | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 50 |) . | \$ | | 0.00 | \$ | | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 5e. | Insurance | 5e | | \$ | | 0.00 | \$ | | 575.00 | _ |
| | 5f. | Domestic support obligations | 5f. | | \$ \$ | | 0.00 | \$ | | 0.00 | _ |
| | 5g. 5h. | Union dues Other deductions. Specify: | 5g |). 1.+ | \$ | | 0.00 | + \$_ | | 48.00 | _ |
| _ | | · · · · · · · · · · · · · · · · · · · | _ | | · — | | | | | 0.00 | _ |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | | 0.00 | \$ | | ,217.00 | _ |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | | 0.00 | \$ | 2 | ,085.00 | <u>-</u> |
| 8. | List 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | 01 | monthly net income. | 88 | | \$ | | 6.00 | \$ | | 0.00 | _ |
| | 8b. | Interest and dividends | 8b |). | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | • | | | • | | | |
| | 0.1 | settlement, and property settlement. | 80 | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 8d. 8e. | Unemployment compensation Social Security | 8c 8e | | \$ | | 0.00 | \$ \$ | | 0.00 | _ |
| | 8f. | Other government assistance that you regularly receive | 00 | | Ψ | | 0.00 | Ψ | | 0.00 | _ |
| | · · · | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | e 8f. | | \$ | | 0.00 | \$ | | 0.00 | |
| | 8g. | Specify: Pension or retirement income | — 8g | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 8h. | Other monthly income. Specify: tax refund | |). 1.+ | \$ | | 0.00 | * | | 0.00 | _ |
| | 011. | tux retuitu | | | Ψ | 20 | 0.00 | | | 0.00 | _ |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 5 | 2,73 | 6.00 | \$ | | 0.0 | 0 |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 2,736 | 6.00 | + \$ | 2.0 | 85.00 | = \$ | 4,821.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | , | | | | | | ,- |
| 11. | Incli othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depe | | | | | | | e J. +\$ | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | 12. | \$ | 4,821.00 |
| 12 | Da. | you expect an increase or decrease within the year after you file this forms | 2 | | | | | | | Combi month | ned ly income |
| ı3. | ַם סט | you expect an increase or decrease within the year after you file this form No. | ſ | | | | | | | | |
| | | Yes Explain: | | | | | | | | | |

Official Form 106l Schedule I: Your Income page 2

| Fill | in this informat | tion to identify yo | our case: | | | | | |
|------------|--|---|--------------------------------------|--|--|------------|--------------------|---|
| Deb | otor 1 | Jessica Lee | Jackson | | | Che | eck if this is: | |
| | | | | | | | An amended filing | |
| Deb | otor 2 | | | | | | A supplement sho | wing postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | f the following date: |
| Unit | ted States Bankru | uptcy Court for the | : EASTE | RN DISTRICT OF PENNS | SYLVANIA | | MM / DD / YYYY | |
| Cas | se number 18 | -15950 | | | | | | |
| (If k | nown) | | | | | | | |
| 0 | fficial Fo | rm 106J | | | | | | |
| S | chedule | J: Your | Exper | ses | | | | 12/1 |
| Be info | as complete a ormation. If mo mber (if knowi | and accurate as | possible eded, atta ry questio | If two married people and the control of the contro | | | | |
| 1. | Is this a join | | iloiu | | | | | |
| | ■ No. Go to | line 2. | | | | | | |
| | | | in a separ | ate household? | | | | |
| | |) | | | | | | |
| | □ Ye | es. Debtor 2 mus | st file Offici | al Form 106J-2, Expenses | s for Separate House | hold of De | ebtor 2. | |
| 2. | Do you have | dependents? | □ No | | | | | |
| ۷. | - | • | | ==== | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | | | | · | | | | □ No |
| | Do not state dependents r | | | | Daughter | | 4 | ■ Yes |
| | dependents i | iames. | | | Dauginei | | | . ■ res □ No |
| | | | | | Daughter | | 8 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | Daughter | | 13 | ■ Yes |
| | | | | | | | | . □ No |
| | | | | | | | | ☐ Yes |
| 3. | expenses of yourself and | enses include people other t your depende | han nts? □ | No Yes | | | | |
| exp | timate your ex penses as of a | | our bankr | uptcy filing date unless y | | | | apter 13 case to report of the form and fill in the |
| app | olicable date. | | | | | | | |
| | | | | government assistance i | | | | |
| | value of such ficial Form 10 | | d have inc | cluded it on Schedule I: | Your Income | | Your exp | penses |
| (0) | noiai i oi iii i o | 01.) | | | | | | |
| 4. | | r home owners d any rent for the | | ses for your residence. I r lot. | nclude first mortgage | e 4. | \$ | 1,178.00 |
| | If not include | ed in line 4: | | | | | | |
| | 4a. Real e | state taxes | | | | 4a. | \$ | 0.00 |
| | | ty, homeowner's | s, or renter | 's insurance | | 4b. | · | 0.00 |
| | | | | ıpkeep expenses | | 4c. | · | 0.00 |
| _ | | owner's associat | | | | 4d. | · - | 0.00 |
| 5. | Additional n | nortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. | \$ | 0.00 |

| Debtor 1 Jess | sica Lee Jackson | Case number (if known) | 18-15950 |
|----------------|---|----------------------------|------------------------------|
| 6. Utilities: | | | |
| | ricity, heat, natural gas | 6a. \$ | 400.00 |
| | r, sewer, garbage collection | 6b. \$ | 100.00 |
| | phone, cell phone, Internet, satellite, and cable services | 6c. \$ | 280.00 |
| | r. Specify: | 6d. \$ | 0.00 |
| | nousekeeping supplies | 7. \$ | 500.00 |
| | and children's education costs | 8. \$ | 0.00 |
| | aundry, and dry cleaning | 9. \$ | 80.00 |
| U, | are products and services | 10. \$ | 300.00 |
| | d dental expenses | | |
| | • | 11. \$ | 120.00 |
| | ntion. Include gas, maintenance, bus or train fare. | 12. \$ | 250.00 |
| | nent, clubs, recreation, newspapers, magazines, and books | 13. \$ | 150.00 |
| | contributions and religious donations | 14. \$ | 0.00 |
| i. Insurance. | • | ιτ. ψ | 0.00 |
| | ide insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life ii | | 15a. \$ | 69.00 |
| | th insurance | 15b. \$ | 0.00 |
| | cle insurance | 15c. \$ | 210.00 |
| | r insurance. Specify: | 15d. \$ | 0.00 |
| | · · · · · · · · · · · · · · · · · · · | 13α. ψ | 0.00 |
| Specify: | not include taxes deducted from your pay or included in lines 4 or 20. | 16. \$ | 0.00 |
| | t or lease payments: | 10. ψ | 0.00 |
| | payments for Vehicle 1 | 17a. \$ | 645.55 |
| | payments for Vehicle 2 | 17b. \$ | 280.00 |
| 17c. Othe | | 17c. \$ | 0.00 |
| 17d. Othe | · · · | 17d. \$ | 0.00 |
| | i. Specily. ents of alimony, maintenance, and support that you did not report as | | 0.00 |
| | rom your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | | 0.00 |
| | nents you make to support others who do not live with you. | \$ | 0.00 |
| Specify: | , | 19. | 0.00 |
| | property expenses not included in lines 4 or 5 of this form or on Sch | | |
| | gages on other property | 20a. \$ | 0.00 |
| | estate taxes | 20b. \$ | 0.00 |
| | erty, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| | tenance, repair, and upkeep expenses | 20d. \$ | |
| | | 20d. \$ 20e. \$ | 0.00 |
| | eowner's association or condominium dues | · | 0.00 |
| . Other: Spe | city: | 21. +\$ | 0.00 |
| 2. Calculate v | your monthly expenses | | |
| - | nes 4 through 21. | \$ | 4,562.55 |
| | ine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | \$ | ., |
| | | \$ | A ECO EF |
| ZZC. AUU III | ne 22a and 22b. The result is your monthly expenses. | Φ | 4,562.55 |
| 3. Calculate y | our monthly net income. | | |
| | line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 4,821.00 |
| | your monthly expenses from line 22c above. | 23b\$ | 4,562.55 |
| | , , , , , , | | .,002100 |
| 23c. Subtr | ract your monthly expenses from your monthly income. | | |
| | result is your monthly net income. | 23c. \$ | 258.45 |
| | | - | |
| | pect an increase or decrease in your expenses within the year after y | | |
| | do you expect to finish paying for your car loan within the year or do you expect you | ur mortgage payment to inc | rease or decrease because of |
| | to the terms of your mortgage? | | |
| ■ No. | | | |
| ☐ Yes. | Explain here: | | |